



*** Tips For * Nursing Mothers**

Taking Medications



Sometimes you may need to take a medication when breastfeeding. Make sure you tell your doctor you are breastfeeding so this can be considered when prescribing the medication. Always check with your doctor or pharmacist before taking over-the-counter medications (even aspirin) and vitamin-mineral pills. Do not take street drugs when breastfeeding!

Many things affect whether a medication will enter breastmilk. For a medication to enter breastmilk, it must first be absorbed into mom's bloodstream. If the medication does not get into mom's bloodstream, it can't enter her breastmilk. In the blood, most medications attach to proteins and do not pass into the breast. If the medication is not attached to protein and passes into the breast, it has to be able to cross into the milk-making cell. If a small amount of the medication does cross into the milk-making cell and enters the milk, it must then survive the acid in the baby's stomach. If enough of the medication makes it out of the baby's stomach and into the baby's bloodstream, THEN it might affect the baby. This SELDOM occurs. Although there are exceptions, usually less than 1% of the dose of a medication will find its way into the baby's bloodstream.

Questions you can ask your doctor about a medicine to see if you need to worry about its effect on your breastfed baby:

General Rules

- 1.** Tell your doctor breastfeeding is important to you and your baby.
- 2.** Work with your doctor in choosing a medication that will not affect breastfeeding.
- 3.** Ask your doctor to prescribe short-acting medications (medications you have to take more frequently), since they generally enter milk at lower levels. They also do not tend to build up in the baby's system over time.
- 4.** Ask your doctor if your baby can easily clear the medication from his system. Beware of medications that babies have trouble removing from their systems. The amount will build up in the baby over time. Older infants (4-18 month old) can tolerate medications much better than newborns.
- 5.** Ask your doctor to choose a medication that binds to protein. They are more often held in mom's blood stream and do not transfer to the milk and the baby.
- 6.** Stay away from medications that affect the brain. These medications often get into breastmilk in higher levels simply due to their make-up. If the medication makes you sleepy or depressed, it is likely to get into the milk and cause the same effects in your baby. For this reason, stay away from street drugs if you are breastfeeding!
- 7.** Wait 2 to 3 hours after taking a short-acting medication before breastfeeding. This will reduce the amount of the medication in your milk.
- 8.** With radioactive compounds, and for any dangerous medication, follow your doctor's or

pharmacist's advice for the length of time to wait before breastfeeding. You can pump and throw away your milk to maintain your milk supply while you are waiting for the medication to clear your system.

9. Anything applied to the nipple (for instance, vitamin E oil) is likely to be absorbed by the infant. Be very cautious. Do not assume that vitamin and mineral oils are harmless. Many reports suggest that too much of the oil can harm your baby.

10. Pharmacists are a good source for information about medications and their effect on breastfeeding mothers and babies.

11. There are several birth control options that can be used while breastfeeding. These options include:

- Barrier methods such as condoms, cervical caps, and diaphragms;
- Progestin-only methods such as the "minipill," Norplant (implant) and Depo-Provera (shot);
- IUDs such as the Copper T 380A or the Progestasert;
- Lactational Amenorrhea Method (LAM); and
- Natural Family Planning (NFP) or Fertility Awareness Method (FAM).

Talk to your health-care provider about the best method of birth control for you.

If you have questions about breastfeeding, contact your local:

WIC Breastfeeding Counselor:

Lactation Consultant:

La Leche League Leader:
